

TECHNICAL MANUSCRIPT REVIEW FORM

	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Date</td> <td>10/05/2012</td> </tr> <tr> <td>Peer Review No.</td> <td></td> </tr> </table>	Date	10/05/2012	Peer Review No.	
Date	10/05/2012				
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Title: Leaching Behavior of AGREMAX TM Manufactured Aggregate Collected from a Structural Fill Application in Puerto Rico	Author(s): A.C. Garrabrants, D.S. Kosson, R. DeLapp and Peter Kariher				
Project Officer/Organization/Address: Susan Thorneloe Mail Code E343-02	Reviewer/Organization/Address: Greg Helms, OSWER Len Grossman, Region 2 Souhail Al-Abed, NRMRL/LRPCD Ed Barth, NRMRL Nick Hutson, OAQPS				
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Performance Period: Jan 2012 - Dec 2012	Date Review Requested: 10/05/2012				
OMIS #: GPRA #:	Date Review Required: 10/19/2012				
Type of Publication/Audience: Public					
Conference Info (if appropriate) Name: Date: Location:	Review Coordinator:				

You are asked to review and comment on the attached manuscript. Feel free to make notations on the manuscript as well as in comments sections below, particularly your recommendations for revisions. If you are unable to review the manuscript by the required date above, please return it now. Your suggestions for alternate or additional reviewers will be welcomed.

SUMMARY RATING	Satisfactory	Unsatisfactory	RECOMMENDATIONS
Please rate the manuscript as follows:			<input type="checkbox"/> (1) Acceptable as is <input type="checkbox"/> (2) Acceptable after minor revision <input type="checkbox"/> (3) Acceptable after major revision <input type="checkbox"/> (4) Not acceptable If you have checked either 3 or 4, please specifically state reason(s) in the comments space below.
Content & scope	<input type="checkbox"/>	<input type="checkbox"/>	
Organization & presentations	<input type="checkbox"/>	<input type="checkbox"/>	
Quality of data & validity of analytical techniques	<input type="checkbox"/>	<input type="checkbox"/>	
Soundness of conclusions	<input type="checkbox"/>	<input type="checkbox"/>	
Editorial quality	<input type="checkbox"/>	<input type="checkbox"/>	
Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	Reviewer's Signature _____ Date _____

Comments (Use extra sheets if needed)